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Appropriations and Human Services Committee Public Hearing
October 22, 2014

Testimony regarding the Medicaid Personal Care Assistance Waiver Renewal

Senator Bye, Representative Walker, Senator Slossberg, Representative Abercrombie and Members of the Appropriations and Human Services Committees,

Thank you for the opportunity to testify. My name is Susan Raimondo and I am the Senior Director of Advocacy and Programs for the National Multiple Sclerosis Society, CT Chapter. I serve on the Money Follows the Person Steering Committee, the Community First Choice Development Council and the Connecticut Long-Term Care Advisory Council.

We want to thank the General Assembly, Executive Branch and Department of Social Services for their long-standing commitment and support of both the state-funded and Medicaid programs that provide Home and Community Based Services to help individuals with disabilities remain independent in the community. The Department of Social Services works tirelessly to assist individuals living with disabilities to remain independent.

I want to use this opportunity to share our concern that currently under the Medicaid PCA Waiver, for individuals under age 65, there is no option for an individual to obtain "24/7" care. However, it can be available for people over age 65 within the Elder Waiver.

The Money Follows the Person Rebalancing Demonstration Program (MFP) can provide an excellent opportunity to provide choice and independence for some individuals, but the reality is that an individual must be able to obtain services

under one of the existing Medicaid waivers in order to successfully transition from a nursing home to the community.

For example, an individual with MS from Glastonbury is age 50 and is currently at a Hartford area skilled nursing facility. He is working with MFP with a goal of transitioning back to his apartment. However just yesterday, we learned that his medical conditions make it medically necessary that he have overnight supports or 24 hour care. Since he is under age 65, he cannot access the option. As of now, he will be remaining in the facility.

In the 2013 MFP Closed Cases Report that was issued by the UConn Center on Aging, the report states that “other areas that may need to be addressed are services for persons with multiple sclerosis, lowering the incidence of falls in the community, and continuing to problem-solve for care plans over the cost cap. In 2013 at least one consumer was re-institutionalized due to an MS flare up and at least four others were not able to transition to the community because their care plan, which often required 24/7 assistance, was over the cost cap.” (pg. 8)

In summary, we want to thank you for this opportunity to share these concerns. We look forward to being part of the solution and to participating in the process of changing the existing system.